

12/08/00

12891 U.S. PTO

UTILITY
PATENT APPLICATION
TRANSMITTAL

Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

200488US0CONT

First Inventor or Application Identifier

Junji HAMURO

Title

IMMUNOMODULATOR

Assignee Name: AJINOMOTO CO. INC.

Assignee Address: No. 15-1, Kyobashi 1-Chome, Chuo-Ku, Tokyo, Japan

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- 1.
- ☒
- Fee Transmittal Form (e.g. PTO/SB/17)
-
- (Submit an original and a duplicate for fee processing)

- 2.
- ☒
- Specification Total Sheets
- 64**

- 3.
- ☒
- Drawing(s) (35 U.S.C. 113) Total Sheets
- 4**

- 4.
- ☒
- Oath or Declaration Total Pages
- 3**

a. ☐ Newly executed (original or copy)b. ☒ Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation / divisional w/ box 16 completed)

- i.
- ☐
- DELETION OF INVENTOR(S)
-
- Signed statement attached deleting inventor(s) named in
-
- the prior application, see 37 C.F.R. §1.63(d)(2) and
-
- 1.33(b).

- 5.
- ☐
- CD-ROM or CD-R in duplicate, large table or Computer
-
- Program (Appendix)

- 6.
- ☐
- Nucleotide and/or Amino Acid Sequence Submission
-
- (if applicable, all necessary)

a. ☐ Computer Readable Form (CRF)

b. Specification or Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); orii. ☐ Paperc. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☒ The prior application is assigned to: Ajinomoto Co.,
Inc., Reel No. 010242, Frame No. 0712-0714
8. ☐ Application Data Sheet. See 37 CFR 1.76
9. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
10. ☐ English Translation Document (if applicable)
11. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS
Citations (15)
12. ☒ Preliminary Amendment
13. ☒ White Advance Serial No. Postcard
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☐ Applicant claims small entity status.
See 37 CFR 1.27
16. ☒ Other: **Request for Priority**

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.: 09/334,647
Prior application information: Examiner: P. Robinson Group Art Unit: 1653For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is
considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon
when a portion has been inadvertently omitted from the submitted application parts.

17. Amend the specification by inserting before the first line the sentence:

- ☒ This application is a ☒ Continuation ☐ Division ☐ Continuation-in-part (CIP)
of application Serial No. 09/334,647, filed on June 17, 1999, now allowed, which is a Continuation-In-Part of Application Serial
No. 09/181,881, filed October 29, 1998, now pending.
- ☐ Which was published in English
- ☐ Which was not published in English
- ☐ This application claims priority of provisional application Serial No. Filed

18. CORRESPONDENCE ADDRESS



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Name:	Norman F. Oblon	Registration No.:	24,618
Signature:		Date:	12/8/00
Name:	James J. Kelly, Ph.D.	Registration No.:	41,504

Docket No. 200488US0CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Junji HAMURO et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: IMMUNOMODULATOR

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	4 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	× \$80 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$270 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
BASIC FEE				\$710.00
TOTAL OF ABOVE CALCULATIONS				\$710.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$710.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$710.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Date: 12/5/00

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